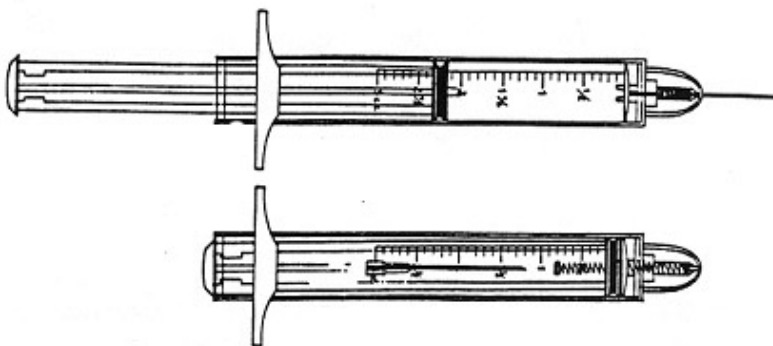




Texas Department
of Insurance

Bloodborne Pathogens Exposure Control Plan



Provided by

Division of
Workers'
Compensation

Workplace & Medical Services,

Outreach & Education

HS05-020A (1-05)

Bloodborne Pathogens Exposure Control Plan

Self-Audit Checklist

Yes No Date
Corrected

Are the following federal and state posters posted where employees can readily view?\

- US Equal Opportunity Commission
- _____ • Equal Employment Opportunity Act-EEOC
- _____ • Americans with Disabilities Act of 1990
- _____ • US Department of Labor
- _____ •
- _____ • does management solicit input from non-managerial employees in the identification and selection of effective engineering and work practice controls?
- _____ • Has a mechanism been established for annual review of the Exposure Control Plan?
- _____ • Is the Exposure Control Plan accessible to all employees?
- _____ • Do you have a written policy that adopts the use of “universal precautions” for the handling of blood and potentially infectious materials to reduce the risk of occupational exposure?
- Does the Exposure Control Plan identify the:
- _____ • engineering controls that will be used to reduce occupational exposure;
- _____ • schedule for regular inspection and replacement of engineering controls;
- _____ • schedule and method for determining the need for replacement of sharps containers?
- Are there written policies (if applicable) that:
- _____ • prohibit recapping of needles using a two-handed technique;
- _____ • prohibit removal of needles from syringes by hand;
- _____ • prohibit bending, shearing, or breaking of contaminated needles;
- _____ • specify the situations where recapping is allowed and the safe practices or devices that are required to reduce the risk of injury;
- _____ • specify the safe practices to be used when handling, or reprocessing reusable sharps;
- _____ • require the use of mechanical means (such as a brush and dust pan, or tongs) to clean up broken glassware?
- Are the containers used to store or transport contaminated reusable sharps:
- _____ • puncture-resistant and leakproof;
- _____ • red in color and labeled with the BIOHAZARD symbol?
- Are containers used for disposal of contaminated sharps:
- _____ • closeable, puncture-resistant, leakproof on sides and bottom;
- _____ • red in color or labeled with the BIOHAZARD symbol;

Yes No Date
Corrected

- _____ • located as close as possible to the immediate area of use;
- _____ • located in areas where sharps may not normally be used, but can be reasonably anticipated to be found, such as the laundry;
- _____ • replaced routinely and not allowed to overfill;
- _____ • maintained in an upright position during transport?
- _____ • Are handwashing facilities reasonably accessible to employees?
- _____ • If handwashing facilities with soap and running water are not accessible, are appropriate alternatives provided, such as antiseptic hand cleansers or towelettes?
- _____ • Are employees instructed about not eating, drinking, smoking, applying cosmetics or lip balm, or handling contact lenses in contaminated work areas?
- _____ • Are food and drink prohibited from storage in refrigerators, freezers, shelves, cabinets, or counter tops where blood and other potentially infectious materials are present?
- _____ • Are employees who could be expected to perform procedures that may create splashing or spraying of blood or other potentially infectious materials trained to perform such procedures in a manner that reduces risk of exposure?
 - Are employees (if applicable) trained:
 - _____ • to recognize specimen containers as containing potentially infectious materials;
 - _____ • to use "universal precautions" when handling all specimens;
 - _____ • if not, are the containers red or labeled with the BIOHAZARD symbol?
 - _____ • Are containers that are used to transport medical specimens appropriately labeled?
 - _____ • Are employees instructed to place all specimen containers that may be contaminated or leak in a secondary container that is leak-resistant or, if necessary, puncture-resistant?
 - _____ • Is contaminated equipment decontaminated prior to servicing?
 - _____ • If unable to be decontaminated, is it labeled and does it specify which portions of the equipment remain contaminated?
 - _____ • Is there a mechanism for repairing, replacing, reprocessing protective barriers and clothing?
 - _____ • Are barrier devices provided for use in emergency CPR?
 - _____ • Are employees trained in the proper selection, indications, mandated use, and proper procedures for disposal or reprocessing of personal protective equipment?
 - _____ • Have employee job duties with occupational exposure been reviewed to determine what protective clothing must be provided?
 - Is appropriate personal protective clothing for the tasks performed provided to employees:
 - _____ • at no cost;
 - _____ • in appropriate sizes;
 - _____ • in accessible locations;
 - _____ • effective in preventing the penetration of blood and other potentially infectious materials?

Yes No Date
Corrected

- _____ • Is a mechanism in place for cleaning, laundering, or disposing, of employees' protective clothing?
- _____ • Is there a mechanism for replacement or washing of an employee-owned uniform or clothing if it becomes contaminated?
 - Does employee training include:
 - _____ • indications for selection, proper use, replacement, and disposal of protective clothing;
 - _____ • the need to remove protective clothing prior to leaving the work area and when it becomes penetrated by blood and other potentially infectious materials?
 - Are gloves made available to employees:
 - _____ • in accessible locations;
 - _____ • suitable for the tasks being performed?
 - Are gloves required to be worn:
 - _____ • when there is reasonable likelihood of contact with blood and other potentially infectious materials;
 - _____ • during all vascular access procedures;
 - _____ • when there is contact with mucous membranes and non-intact skin;
 - _____ • when contaminated items or surfaces are handled?
 - _____ • are alternative gloves available to employees who are allergic to those normally provided?
- _____ • Are face and eye protection provided when, for instance, following an accident there is a potential for splashing, spraying, or splattering of blood or potentially infectious materials?
- _____ • If glasses are used as protective eyewear, do they have shields?
 - Is there a written procedure for cleaning and decontamination of:
 - _____ • environmental surfaces, e.g., floors;
 - _____ • work surfaces;
 - _____ • equipment?
 - Has a written procedure been established for reusable trash receptacles that hold contaminated items, including:
 - _____ • a regular schedule for inspection and decontamination of containers;
 - _____ • procedures for cleaning and decontamination when visibly contaminated?
 - Are there written procedures for bagging, handling, and transporting of contaminated laundry that:
 - _____ • prohibit the sorting or rinsing in guest areas;
 - _____ • specify the types of bags or containers that will be used to prevent leakage;
 - _____ • specify the alternative labeling when "universal precautions" are used for handling all contaminated laundry?

Yes No Date
Corrected

- _____ • Does your employee training cover all procedures for identifying, bagging, handling, and transporting of contaminated laundry?
 - Are the containers for regulated waste:
 - _____ • closeable;
 - _____ • able to prevent leakage of fluids;
 - _____ • labeled with the BIOHAZARD symbol or colored red?
 - _____ • Are employees instructed to close all regulated waste containers prior to removal to prevent spillage during handling, transporting, or shipping?
 - _____ • Do policies and procedures identify the responsibility of department heads, managers and employees in complying with the recommended practices?
 - Do these policies and procedures include:
 - _____ • the responsibility of the employee;
 - _____ • recommended practices;
 - _____ • how compliance monitoring will be done;
 - _____ • how noncompliance will be reported and documented;
 - _____ • how follow-up will be conducted;
 - _____ • the action to be taken for noncompliance; e.g., disciplinary action, if necessary?
 - _____ • Has a determination been made of which employees have potential occupational exposure and are eligible for Hepatitis B vaccination?
 - Is the Hepatitis B vaccine provided to all employees with potential occupational exposure:
 - _____ • free of charge;
 - _____ • at a reasonable time and place convenient to the employee;
 - _____ • in accordance with U.S. Public Health Service recommendations?
 - Has a mechanism been established to offer the vaccine to:
 - _____ • current employees;
 - _____ • new employees within ten days of their initial assignment?
 - Is specific training provided prior to vaccination that includes information on:
 - _____ • the Hepatitis B vaccine;
 - _____ • its safety, efficacy, and methods of administration;
 - _____ • the benefits of being vaccinated;
 - _____ • the right to decline vaccination and have it still be provided upon request at a later date?
 - _____ • Do employees who decline vaccination sign a declination statement?
 - _____ • Has a mechanism been established to obtain a written opinion from the evaluating health care professional on the vaccination status of each employee?
 - _____ • Is a copy of this written opinion provided to the employee?
 - _____ • Are all other employee health records containing medical findings and diagnoses kept confidential?

Yes	No	Date	
			Corrected
<input type="checkbox"/>	<input type="checkbox"/>	_____	• Are records maintained of the vaccination status of all employees who have a potential occupational exposure?
<input type="checkbox"/>	<input type="checkbox"/>	_____	• Have exposure incidents been defined?
			• Has a mechanism been established to:
<input type="checkbox"/>	<input type="checkbox"/>	_____	• document the route(s) of exposure and circumstances under which all exposure incidents occur;
<input type="checkbox"/>	<input type="checkbox"/>	_____	• evaluate exposure incidents that allow corrective action to be taken?
			• Is a confidential medical evaluation and follow-up provided immediately following exposure incidents, including:
<input type="checkbox"/>	<input type="checkbox"/>	_____	• evaluation of the exposure incident;
<input type="checkbox"/>	<input type="checkbox"/>	_____	• collection and testing of the source individual's blood for HBV and HIV serological status, if not already known;
<input type="checkbox"/>	<input type="checkbox"/>	_____	• post-exposure prophylaxis when medically indicated, as recommended by the U.S. Public Health Service at the time of the exposure;
<input type="checkbox"/>	<input type="checkbox"/>	_____	• counseling;
<input type="checkbox"/>	<input type="checkbox"/>	_____	• evaluation of any reported illnesses related to the exposure incident?
<input type="checkbox"/>	<input type="checkbox"/>	_____	• Is information on the results of the source individual's blood testing provided to the employee?
<input type="checkbox"/>	<input type="checkbox"/>	_____	• Are there procedures that specify what should be done if consent cannot be obtained from the source individual?
<input type="checkbox"/>	<input type="checkbox"/>	_____	• Are baseline blood samples from exposed employees who initially decline HIV testing held for 90 days?
<input type="checkbox"/>	<input type="checkbox"/>	_____	• is there a policy that provides for testing these samples from the source individual?
			• Is the evaluating health care professional provided with:
<input type="checkbox"/>	<input type="checkbox"/>	_____	• a copy of the Standard;
<input type="checkbox"/>	<input type="checkbox"/>	_____	• a description of the exposed employee's duties as they relate to the exposure incident;
<input type="checkbox"/>	<input type="checkbox"/>	_____	• documentation of the route(s) of exposure and circumstances under which the exposure occurred;
<input type="checkbox"/>	<input type="checkbox"/>	_____	• results of the source individual's blood testing, if available;
<input type="checkbox"/>	<input type="checkbox"/>	_____	• all medical records relevant to treatment of the employee including vaccination status?
			• Is the employer provided with a copy of the evaluating health care professional's written opinion, which includes information that the employee has been informed about:
<input type="checkbox"/>	<input type="checkbox"/>	_____	• the results of the medical evaluation;
<input type="checkbox"/>	<input type="checkbox"/>	_____	• any medical conditions that may arise from exposure that may require further treatment?

Yes	No	Date	
			Corrected
<input type="checkbox"/>	<input type="checkbox"/>	_____	<ul style="list-style-type: none"> • Are needlestick injuries and other exposure incidents that result in medical treatment or seroconversion recorded on the OSHA-U.S.A. 300 Log and/or local summary of occupational injuries or illnesses?
<input type="checkbox"/>	<input type="checkbox"/>	_____	<ul style="list-style-type: none"> • Is identifying information related to bloodborne pathogens removed prior to granting access to the records?
<input type="checkbox"/>	<input type="checkbox"/>	_____	<ul style="list-style-type: none"> • Does employee training include information on the actions to be taken following an exposure incident, including the reporting methods, and the availability of medical follow-up?
<input type="checkbox"/>	<input type="checkbox"/>	_____	<ul style="list-style-type: none"> • When indicated, is the universal BIOHAZARD symbol always used in conjunction with the word "BIOHAZARD"?
			<ul style="list-style-type: none"> • Are there written procedures that outline the specific labeling required for: <ul style="list-style-type: none"> <input type="checkbox"/> <input type="checkbox"/> _____ • specimens if universal precautions are not observed for handling all specimens; <input type="checkbox"/> <input type="checkbox"/> _____ • laundry bags if "universal precautions" are not observed for handling all laundry; <input type="checkbox"/> <input type="checkbox"/> _____ • refrigerators and freezers that contain blood or other potentially infectious materials; <input type="checkbox"/> <input type="checkbox"/> _____ • containers used to store, transport, or ship regulated waste, blood, other potentially infectious materials; <input type="checkbox"/> <input type="checkbox"/> _____ • sharps disposal containers; <input type="checkbox"/> <input type="checkbox"/> _____ • contaminated equipment that is sent for servicing or repair?
			<ul style="list-style-type: none"> • Is a mechanism in place to provide training: <ul style="list-style-type: none"> <input type="checkbox"/> <input type="checkbox"/> _____ • to all current employees as soon as possible; <input type="checkbox"/> <input type="checkbox"/> _____ • to new employees at the time of initial employment?
			<ul style="list-style-type: none"> • Is training provided to all employees with potential occupational exposure as defined in the Exposure Control Plan: <ul style="list-style-type: none"> <input type="checkbox"/> <input type="checkbox"/> _____ • at no cost to the employee; <input type="checkbox"/> <input type="checkbox"/> _____ • during working hours; <input type="checkbox"/> <input type="checkbox"/> _____ • at a reasonable location; <input type="checkbox"/> <input type="checkbox"/> _____ • training records are maintained for 3 years from the date of the training; <input type="checkbox"/> <input type="checkbox"/> _____ • by an individual who is knowledgeable in the subject matter?
			<ul style="list-style-type: none"> • Does the training include: <ul style="list-style-type: none"> <input type="checkbox"/> <input type="checkbox"/> _____ • an accessible copy of the regulatory text of the Standard; <input type="checkbox"/> <input type="checkbox"/> _____ • a general explanation of the epidemiology and symptoms of bloodborne diseases; <input type="checkbox"/> <input type="checkbox"/> _____ • an explanation of the modes of transmission of bloodborne pathogens; <input type="checkbox"/> <input type="checkbox"/> _____ • an explanation of the employer's Exposure Control Plan and the means by which the employee can obtain a copy of the written plan; <input type="checkbox"/> <input type="checkbox"/> _____ • an explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials; <input type="checkbox"/> <input type="checkbox"/> _____ • an explanation of the use and limitations of methods that will prevent or reduce exposure, including appropriate engineering controls, work practices, and personal protective equipment;

Yes	No	Date	
		Corrected	
<input type="checkbox"/>	<input type="checkbox"/>	_____	<ul style="list-style-type: none"> information on the types, proper use, location, removal, handling, decontamination, and disposal of personal protective equipment;
<input type="checkbox"/>	<input type="checkbox"/>	_____	<ul style="list-style-type: none"> an explanation of the basis for selection of personal protective equipment;
<input type="checkbox"/>	<input type="checkbox"/>	_____	<ul style="list-style-type: none"> information on the Hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered free of charge;
<input type="checkbox"/>	<input type="checkbox"/>	_____	<ul style="list-style-type: none"> information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials;
<input type="checkbox"/>	<input type="checkbox"/>	_____	<ul style="list-style-type: none"> an explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available;
<input type="checkbox"/>	<input type="checkbox"/>	_____	<ul style="list-style-type: none"> information on the post-exposure evaluation and follow-up required to be provided to an employee following any exposure incident;
<input type="checkbox"/>	<input type="checkbox"/>	_____	<ul style="list-style-type: none"> an explanation of the signs and labels and/or color coding used to identify hazards;
<input type="checkbox"/>	<input type="checkbox"/>	_____	<ul style="list-style-type: none"> an opportunity for interactive questions and answers with the person conducting the training?
<input type="checkbox"/>	<input type="checkbox"/>	_____	<ul style="list-style-type: none"> Is the training appropriate in content, language, and vocabulary to the educational, literacy, and language background of the employee? <ul style="list-style-type: none"> Are written training records kept for three years which include: <ul style="list-style-type: none"> the dates of the training sessions; the contents or a summary of the training?
<input type="checkbox"/>	<input type="checkbox"/>	_____	<ul style="list-style-type: none"> Is there a mechanism to ensure that medical records are kept confidential?
<input type="checkbox"/>	<input type="checkbox"/>	_____	<ul style="list-style-type: none"> Do employees have access to their medical records?